

# STATE OF INDIANA: TRADITIONAL PLAN

## Blue Access<sup>SM</sup> (PPO)

### Summary of Benefits for 2004

COVERED BENEFITS	NETWORK/NON-NETWORK (MEMBER'S RESPONSIBILITY)
<b>Deductible</b> (Single/Family) (Applies only to percent (%) copayments) <i>Deductibles are commingled Network and Non-network</i>	For Employees whose annual salary is less than \$25,000: \$0 deductible per Enrollee; \$0 per Family For Employees whose annual salary is \$25,000 to \$35,000: \$125 deductible per Enrollee; \$400 per Family For Employees whose annual salary is more than \$35,000: \$500 deductible per Enrollee; \$1,000 per Family
<b>Out-of-Pocket Maximum</b> (Single/Family)  <i>Out-of-Pockets are commingled Network and Non-network</i>	\$1,000 per Enrollee in addition to the yearly deductible. \$2,400 per Family in addition to the yearly deductible  The out-of-pocket maximum limit accrues on a calendar year basis. After the out-of-pocket limit has been met, benefits are paid at 100% of covered charges for the remainder of that calendar year.
<b>Office Visit</b>	20% Network/40% Non-Network Per Visit
<b>Routine Care</b>	20% Network/40% Non-network: Services include: Well Baby immunizations for eligible dependents under age 2, annual physical for employees and their eligible covered dependents, flu shots, annual pap smears and diagnostic services performed with the annual physical. This benefit does not include inpatient services surgical procedures.
<b>Maternity Services</b>	
<b>Newborn Initial and Subsequent Care</b>	
<b>Inpatient Services</b>	
<b>Outpatient Facility Services</b>	
<b>Professional/Ancillary/Home Care</b> (Inpatient/Outpatient)	
<b>Emergency Illness/Emergency Accident</b>	
<b>Ambulance</b>	20%
<b>Radiation/Inhalation Therapy, Speech and Occupational Therapy</b>	
<b>Medical Supplies, Equipment and Appliances</b>	
<b>Outpatient Therapy Visit Limits</b> Physical/Occupational Speech	
<b>Mammogram</b>	20% Network/40% Non-network: Includes 1 per person, per calendar year. Additional mammography services and ultrasound covered as determined Medically Necessary by your Physician.
<b>Routine Prostate Antigen Tests (PSA)</b>	20% Network/40% Non-network: Includes 1 per person, per calendar year
<b>Colorectal Cancer Exam/Laboratory Testing:</b>	20% Network/40% Non-network
<b>Diabetes Self Management Training</b>	
<b>Diagnostic Services</b> In an office or laboratory	Covered in Full
<b>Diagnostic Services:</b> In a setting other than office or laboratory	20%/Network/40% Non-network
<b>Temporomandibular Joint (TMJ) Services</b>	Outpatient Facility/Provider Individual: TMJ Surgery: 20% Network/40% Non-network TMJ Other Services: \$2,500 lifetime maximum for all services (network/non-network)
<b>Private Duty Nursing:</b> Only covered under Home Health Care benefit.	: \$5,000 plan maximum, per enrollee

<b>COVERED BENEFITS</b>	<b>NETWORK/NON-NETWORK (MEMBER'S RESPONSIBILITY)</b>																				
<b>Home Health Care:</b> No RN/LPN unless billed through a Home Health Care Agency	Private Duty Nursing limited to \$5,000 Plan Maximum per Enrollee																				
<b>Dental Care</b>																					
<b>Accidental Dental Care</b> Caused by an accidental injury after the employee's effective date of coverage	20% Network/20% Non-network																				
<b>Home IV Therapy</b>																					
<b>Employee Assistance Program</b>	Provides consultation and referral services for human concerns for employees and their household members.																				
<b>Managed Mental Health including Substance Abuse</b>	Authorization of all inpatient and outpatient psychiatric and substance abuse services is required. If authorization is not obtained benefits will not be allowed. The deductible does not apply to Managed Mental Health Care Benefits <b>IN-NETWORK BENEFITS:</b> *Inpatient and Outpatient Services-paid 100% of the negotiated diem rate, 365 days per confinement, 90-day renewal period. *Intensive outpatient (IOP)-100% of negotiated rate Substance abuse benefits-100% of the negotiated rate No visit limitation for mental illness <b>OUT-OF NETWORK BENEFITS:</b> *Inpatient and Outpatient Services-Day limit per enrollee are 365 days per confinement, 90 day renewal period Benefits paid: 60% *Intensive outpatient (IOP) Benefits paid: 60% of what would have been paid if treatment were in the network No visit limitation for mental illness <b>*THESE SERVICES MUST BE CERTIFIED BY CONTRACTOR TO RECEIVE BENEFITS</b> (Excluding human organ and tissue transplants)																				
<b>Lifetime Maximum</b>																					
<b>Human Organ and Tissue Transplants</b> Specialty Network	20% Network/40% Non-network Separate 1 million contract maximum See contract for other maximums and exclusions.																				
<b>Prescription Drug Options:</b> Including Birth Control Pills <b>Network Retail Pharmacies:</b> 100% of allowable cost after copayment up to a  34-days of medication or 100 units <b>Anthem Rx Direct Mail Service:</b> 100% of allowable cost after copayment up to a  90-day supply	<table> <thead> <tr> <th><b>Network</b></th><th><b>Non-network</b></th></tr> </thead> <tbody> <tr> <td colspan="2">Combined \$25 deductible for retail and mail order per person per calendar year.</td></tr> <tr> <td>10% generic</td><td>30%</td></tr> <tr> <td>20% brand</td><td>40%</td></tr> <tr> <td colspan="2">Combined \$25 deductible for retail and mail order per person per calendar year.</td></tr> <tr> <td>10% generic</td><td>30%</td></tr> <tr> <td>20% brand</td><td>40%</td></tr> <tr> <td colspan="2">The network penalty will be waived if there is no network pharmacy within 12 miles of the participant's home.</td></tr> <tr> <td colspan="2"><b>The prescription drug copays applies to the medical out-of-pocket.</b></td></tr> <tr> <td colspan="2">50% penalty for non compliance</td></tr> </tbody> </table>	<b>Network</b>	<b>Non-network</b>	Combined \$25 deductible for retail and mail order per person per calendar year.		10% generic	30%	20% brand	40%	Combined \$25 deductible for retail and mail order per person per calendar year.		10% generic	30%	20% brand	40%	The network penalty will be waived if there is no network pharmacy within 12 miles of the participant's home.		<b>The prescription drug copays applies to the medical out-of-pocket.</b>		50% penalty for non compliance	
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<b>Utilization Management</b>																					

## See Benefit Booklet for Exclusions

### Note:

- *Dependent age: to the end of the calendar year of age 19; age 23.*

*This benefit description is intended to be a brief outline of coverage. The entire provisions of benefits and exclusions are contained in the Group Contract, Certificate and Schedule of Benefits. In the event of a conflict between the Group Contract and this description, the terms of the Group Contract will prevail.*



## Anthem IRIS<sup>SM</sup>

*Anthem Blue Cross and Blue Shield  
is dedicated to providing quality services  
and programs that improve the health of our  
members. We're pleased to introduce you to  
Interactive Real-time Information Sharing — IRIS.*

[anthem.com](http://anthem.com)

# Using Technology to Help You Stay Healthy and Safe

## ***What is IRIS and Why is It Important to Me?***

“IRIS” stands for Interactive Real-time Information Sharing. The program is designed as a “safety-net” to help our members stay healthy and safe. The technology within the IRIS program automatically compares “best-in-class” medical practice to your current treatment plan.

## ***How Does IRIS Work?***

Anthem’s IRIS program works along the same idea as a security system for your home. With a home security system, you know that a team of professionals monitors the status of your house even when you’re not around. For example, if a fire were to start while you were on vacation, the alarm system in the house would signal the security team. They would call the fire department and try to save your home from serious damage.

Think of IRIS as the security system monitoring your health care, with the goal being to improve the quality of care you receive and help prevent medical errors.

IRIS technology alerts Anthem’s IRIS team of clinical practitioners to any potentially dangerous medical situations. For example, when you have a new prescription filled at your pharmacy, IRIS technology is aware of the new prescription. If the IRIS system detects that the prescription might create problems for you when combined with your other medications, a member from Anthem’s IRIS clinical team would contact you and your doctor. We call these clinical alerts “Care Considerations.”

## ***Care Consideration Categories***

The example of a drug interaction represents only one type of situation in which Anthem’s clinical practitioners might generate a “Care Consideration” communication and contact you and your doctor. In general, there are three types of situations that create a Care Consideration communication:

### **Omissions**

An omission occurs when a member needs added treatment or added monitoring for a condition. In contrast, an omission can also occur when a member is receiving care that is not helping an underlying condition.

### **Commissions**

When a member is at risk for a drug interaction or needs an alternative treatment, the situation is described as a commission.

### **Gaps**

A gap is present when a member needs more testing to determine the underlying cause of a health condition.

Depending on the nature and severity of a health condition, an Anthem clinical practitioner will contact members and their physicians by phone, fax or mail. Care Consideration letters and communications contain a toll-free number that we encourage members to call with any questions. A sample Care Consideration letter is pictured on the next page.

## ***How Does IRIS Know So Much?***

Anthem’s IRIS program is constantly monitoring well-respected medical journals for “best-in-class” medical practices. The technology that runs the IRIS system holds information on guidelines and standards for treatment from medical journals such as *The Journal of the American Medical Association* and *The New England Journal of Medicine*. It also contains data from professional medical associations such as the American Heart Association, American Diabetes Association, and the American Academy of Pediatrics.

## ***Your Doctor Still Calls the Shots***

It’s important to realize that Anthem’s IRIS system and the clinical practitioners will only make recommendations regarding medical practices and treatment. Their recommendations are only suggestions and are not a substitute for the expertise and judgment of your personal physician. Just as homeowners who have security systems still lock their doors at night and rely on their alarms as a backup, our members use IRIS as a similar “safety system.”

## ***A Question about Confidentiality***

You should know that any findings and information detected by IRIS and shared with you and your physician are private. This information is confidential and will not be shared with your employer.

## A Sample Care Consideration Letter

February 4, 2003



DR SMITH  
123 MAIN STREET  
ANYTOWN USA

\_\_\_\_\_  
*Your doctor's  
contact information*

RE: MR. JONES  
DOB: 9/4/1971

\_\_\_\_\_  
*Your patient information*

Dear Dr. Smith:

Anthem Blue Cross and Blue Shield would like to introduce you to an innovative outpatient safety program called IRIS. IRIS stands for Interactive Real-time Information Sharing and combines evidence-based clinical rules with the power of information technology.

This physician-designed, computer-assisted program works in the following manner:

- (1) Analyze available medical and pharmacy claims, lab data, and other clinical information.
- (2) Develop individual member profiles.
- (3) Compare available data to evidence-based clinical rules.
- (4) Identify members who may benefit from specific clinical interventions called "Care Considerations."
- (5) Communicate system generated "Care Considerations" to treating physicians and members when appropriate.

IRIS technology and data mining components are operated by Active Health Management, Inc. under an agreement by and between Anthem Blue Cross and Blue Shield and Active Health Management, Inc.

Please note that this is neither a utilization review, precertification, nor a professional consultation program. This information is being provided to assist you in offering optimal health care to your patient, and should be considered according to your best independent medical judgment and expertise.

The IRIS system has identified the following Care Consideration(s) for your patient:

### REDUCE EXCESSIVE ALBUTEROL BY ADDING INHALED CORTICOSTEROID

Your patient has claims evidence for asthma and for multiple refills of short-acting beta agonists, and no claims evidence for an inhaled steroid. The NAEPP Asthma Guidelines Update recommends that the preferred treatment for mild persistent asthma is the addition of a low-dose inhaled steroid. Alternative treatments include the addition of cromolyn, leukotriene modifier, nedocromil or sustained release theophylline. If your patient fits this clinical profile, and if not already done or contraindicated, consider adding an inhaled steroid to your patient's medical regimen. (Note: the number of inhalations in a canister of short-acting beta agonist is approximately 200. The use of one canister every 1-2 months suggests excessive use of the inhaler.

The above Care Consideration(s) is/are based on the most current data available to us. If our information is inaccurate or incomplete, please forward additional information to expand the member specific profile. You will find our toll-free phone and fax numbers below. If the Care Consideration(s) have already been implemented, thank you for taking the time to review this communication.

For further information, please call the IRIS clinical team toll-free at 866-755-2747. Our toll-free fax number is 866-378-9824.

Sincerely,

Lewis R. Kinkead, M.D.  
Lead Medical Director

Diane E. Kolak, BSN, R.N.  
IRIS Program Manager

\_\_\_\_\_  
*Toll-free number*

Cc: Mr. Jones \_\_\_\_\_ *Your copy*

Dear Mr. Jones: This Care Consideration is generalized and is not a substitute for the expertise and judgment of your personal physician.



**For more information,  
visit our web site at  
[anthem.com](http://anthem.com).**

Anthem serves residents and businesses in Virginia, excluding the city of Fairfax, the town of Vienna and the area east of State Route 123.

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# More Than Great Health Coverage



***As a national Anthem member, you get more than coast-to-coast health coverage, you get services that can help you be healthier.***

## **Anthem IRIS<sup>SM</sup>**

We are pleased to announce that effective Oct. 1, 2002, XXXXXX employees have access to the Anthem IRIS (Interactive Real-time Information Sharing) program. This “safety-net” program compares best-in-class medical practice to current treatment plans participants are receiving and gives members the power to significantly improve quality of care and prevent medical errors.

### **Anthem IRIS goals for members:**

- improve or stabilize clinical conditions
- speed recovery
- increase quality of life
- increase satisfaction level with health professionals
- improve members’ understanding of health conditions
- help prevent medical or pharmaceutical errors

The best-in-class medical practice standards utilized by the IRIS program are not Anthem-declared standards, but rather data gathered from randomized clinical studies published in peer-reviewed medical journals, such as *The Journal of the American Medical Association* (JAMA) or *The New England Journal of Medicine* (NEJM). These guidelines and standards are widely accepted by physicians and professional associations including the American Heart Association and American Diabetes Association.

### **Examples of an IRIS care consideration may be one or more of the following:**

- member is at risk for a drug interaction
- member needs treatment or additional monitoring
- member needs an alternative treatment
- member needs more work-up or testing to determine the underlying cause for a health condition

Should you or a family member be identified as an individual who would benefit from a care consideration, you and your physician will be notified. Depending upon the nature and severity of the condition identified, Anthem may contact you and your physician by phone, fax or mail. Should you have any questions regarding an IRIS care consideration, we encourage you or your physician to call the toll-free phone number included in the letter or fax.

We are excited about this program and hope that you and your family members will find it beneficial in offering an additional level of safety and piece of mind.

Should you have questions of a general nature, please call the customer service number on the back of your Blue Cross and Blue Shield ID card.

## **MyHealth@Anthem**

Smokers, calculate how much of your hard-earned money goes up in smoke. Insomniacs, get help nodding off. Diabetics, find help in the self-care center. Fitness enthusiasts, see whether those abdominal machines really work. No matter what your health interest, **MyHealth@Anthem** has something for you.

- Read from thousands of articles
- Research the medical library.
- Use fun quizzes, polls and calculators.
- Sign up for a personalized e-newsletter; **you** choose the topics.
- E-mail articles to friends and family with a click of the mouse.

## **SpecialOffers@Anthem**

Look and feel your best (for less) with **SpecialOffers@Anthem**. Just for being an Anthem member, you can receive discounts on health-related products and services. Here is just a glimpse at some of the savings you’ll find:

- up to 25 percent on visits to massage therapists and acupuncturists
- up to 40 percent on vitamins, herbal supplements, books, videos, nutrition products and more
- 15 percent on everything at **babystyle.com**
- 15 percent to 20 percent on frames and contacts, or get Laser Vision surgery at just \$895 per eye
- 15 percent on floral orders from **ftd.com**
- discounts on a membership to a national fitness club
- discounts on health-related books from **amazon.com**
- and so much more!